N20000004434

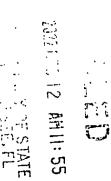
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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12/12/22--01010--030 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MONAD TERRACE CONDOMINIUM ASSOCIATION, INC.
Name of Corporation
DOCUMENT NUMBER: N20000004434
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
REBECCA N. CASAMAYOR, ESQ.
Name of Contact Person
HABER LAW, P.A.
Firm/Company
251 NW 23RD STREET
Address
MIAMI, FL 33127
City/State and Zip Code
RCASAMAYOR@HABER.LAW
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
REBECCA N. CASAMAYOR Name of Contact Person at (305) 379-2400 Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida St organized under the laws of the State of $\frac{F}{F}$ registered agent, or both, in the State of Flo	LORIDA	
1. The name of t	the corporation: MONAD TERRAC	E CONDOMINIUM ASSOCIATION, INC.		
2. The principal	office address: 1300 MONAD TERR	RACE, MIAMI BEACH, FL 33139		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 04/23/2020	Document number: N2000000	4434	
	d street address of the current register timent of State: (If resigned, enter re	ered agent and registered office on file with signed)	n the	
	EISINGER LAW			
	4000 Hollywood Boulevard, Suite 265-South			
	Hollywood, FL 33021			
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	1072 C 12 AM II: 55	
	HABER LAW, P.A.		EST STE	
	251 NW 23 STREET		LE SS	
	P	O. Box NOT acceptable		
	MIAMI, FL 33127			
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its	registered agent,	
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an oren notified in writing of the change.	officer so	
Alon	ander. Dil ennarda	Alexander DiLeonardo, President, H	IOA	
Signatu	ander DiLeonardo re of an officer or director	Printed or typed name and title	<u> </u>	
I further agree of my duties, an document is being corporation has been been by:	to comply with the provisions of al ad I am familiar with and accept th	nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered in the registered office address, I hereby ange.	olete performance agent. Or, if this confirm that the	
KCHOONAN		12/7/2022		
AF BYCOBF 45AZ4 SIE	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
REBECCA N. C	ASAMAYOR			
T	yped or Printed Name			
	* * * FILIN	G FEE: \$35.00 * * *		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)